

Submit form and fee to: Experior 1260 Energy Lane St. Paul, MN. 55108 Attn: MA Social Worker 1 800-626-0750	SOCIAL WORKERS RE-LICENSURE (> 2 years) REGISTRATION FORM for the COMMONWEALTH OF MASSACHUSETTS	See Other Side For Instructions
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1 <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Social Security Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Telephone Number (during the day)
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☐ Requesting special accommodations (see instruction (1) on reverse side)

1. How long has your license been lapsed? <input type="checkbox"/> Less than two years (No exam required)	2. Mark the appropriate block for the examination you will be taking (if any). <input type="checkbox"/> LICSW <input type="checkbox"/> LCSW <input type="checkbox"/> LSW <input type="checkbox"/> LSWA
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5 Make your certified check or money order payable in U.S. currency to “Experior” for the appropriate amount.

Type of License	<u>FEES AS OF October 1, 2003:</u>
<input type="checkbox"/> LICSW	\$210.00
<input type="checkbox"/> LCSW	\$199.00
<input type="checkbox"/> LSW	\$187.00
<input type="checkbox"/> LSWA	\$177.00

***FEES ARE SUBJECT TO CHANGE**

	FOR OFFICE USE ONLY DATE: _____ AMT REC'D: _____ CHECK #: _____
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MASSACHUSETTS SOCIAL WORKERS RE-LICENSURE INSTRUCTIONS

READ ALL INSTRUCTIONS CAREFULLY PRIOR TO SUBMITTING THE APPLICATION

Experior is a professional test administration service under contract with the Massachusetts Division of Professional Licensure. All candidates will be required to complete the registration form (on the reverse side) and submit this form and fee to Experior. It will be the candidate's responsibility to insure that all necessary application documents have been correctly completed and submitted along with this form to Experior. ➡**ALL FORMS MUST BE COMPLETED AND SENT TO EXPERIOR**

Fill in the requested information completely and legibly. Typing is preferred.

1. If you are requesting special accommodations due to a disability, you must attach official documents to this form. **Requests must be received with the application.**
2. The Processing Fee is listed on the front of this form. Applications received without the processing fee attached will be returned.
3. Sign and date the candidate affidavit at the bottom of the form.
4. Submit the Registration Form, completed Application and Fee to:

**Experior
1260 Energy Lane
St. Paul, MN. 55108
Attn: MA Social Worker**

- If you have any questions about the Registration form, Application, fee, or what gets submitted to whom and when, please contact Experior at 508-624-0826 or 800-626-0750 between 8:00 a.m. and 4:30 p.m. Eastern Standard Time.
5. **SCHEDULING:** You may not take the National Examination administered by ASWB until Experior has processed this application. A letter of approval will be mailed to you after reviewing the completed application. The letter will state what level of examination is authorized and include a Candidate Handbook from ASWB. The handbook will contain information on scheduling the examination.
 6. **REFUND AND CANCELLATION POLICY:** Application fees are non-refundable.